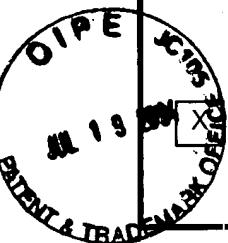


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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number	IOM-P052
		First Named Inventor	Plummer et al.
COMPLETE IF KNOWN			
		Application Number	10/708,432
		Filing Date	March 3, 2004
		Art Unit	
		Examiner Name	



**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

**Declaration
Submitted
With Initial
Filing**

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number	IOM-P052
First Named Inventor	Plummer et al.
<i>COMPLETE IF KNOWN</i>	
Application Number	10/708,432
Filing Date	March 3, 2004
Art Unit	
Examiner Name	

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

IMPROVED BUFFER GEL FOR IONTOPHORESIS ELECTRODES

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on 03/03/2004 as United States Application Number or PCT International
(MM/DD/YYYY)

Application Number **10/708,432** and was amended on (MM/DD/YYYY) (if applicable).

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2)

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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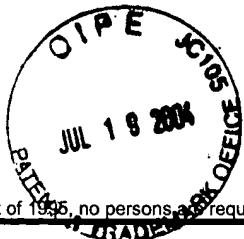
DECLARATION – Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number: 22876 OR <input type="checkbox"/> Correspondence address below			
Name Jody L. Factor			
Address 1327 W. Washington Blvd., Suite 5G/H			
City Chicago		State IL	ZIP 60607
Country USA		Telephone (312) 226-1818	Fax (312) 226-1919
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Thomas		Family Name or Surname Plummer	
Inventor's Signature 			Date 6/5/04
Residence: City Salt Lake City	State Utah	Country USA	Citizenship US
Mailing Address 3465 Tree Farm Ln.			
City Salt Lake City	State Utah	ZIP 84121	Country USA
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Malgorzata		Family Name or Surname Szlek	
Inventor's Signature			Date
Residence: City Salt Lake City	State Utah	Country USA	Citizenship PL
Mailing Address 3660 Carolyn Street			
City Salt Lake City	State Utah	ZIP 84106	Country USA
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the _____ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

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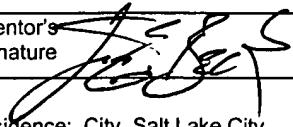
DECLARATION – Utility or Design Patent Application

<input checked="" type="checkbox"/> Direct all correspondence to: <input type="text"/> Customer Number: <input type="text" value="22876"/> OR <input type="checkbox"/> Correspondence address below			
Name Jody L. Factor			
Address 1327 W. Washington Blvd., Suite 5G/H			
City Chicago		State IL	ZIP 60607
Country USA		Telephone (312) 226-1818	Fax (312) 226-1919
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NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Thomas		Family Name or Surname Plummer	
Inventor's Signature			Date
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Mailing Address 3465 Tree Farm Ln.			
City Salt Lake City	State Utah	ZIP 84121	Country USA
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Malgorzata		Family Name or Surname Szlek	
Inventor's Signature 			Date <i>6/3/04</i>
Residence: City Salt Lake City	State Utah	Country USA	Citizenship PL
Mailing Address 3660 Carolyn Street			
City Salt Lake City	State Utah	ZIP 84106	Country USA
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the _____ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			



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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet	
Page 1 of 1		

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Jon E. 		Beck	
Inventor's Signature		Date 6/30/04	
Residence: City Salt Lake City	State Utah	Country USA	Citizenship US
Mailing Address 3445 East Del Verde Avenue			
Mailing Address			
City Salt Lake City		State Utah	Zip 84109
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City		State	Zip
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
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